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FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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1. NAME O	OF ITEE (in full)	TYPE OR PRINT		imple: If typi r the lines.	ng, type	12FE4M:			
The 2016 Committee									
ADDRESS (number and street)			e Avenue W	1 1 1 1	1 1 1 1				
thai	eck if different n previously orted. (ACC)					VA	22180	5615	
2. FEC IDENTIFICATION NUMBER ▼			CITY A	CITY A			STATE ▲ ZIP CODE ▲		
C	0569905		3. IS THIS REPORT		NEW (N) <b>OR</b>	AM (A)	ENDED		
4. TYPE (Choose	OF REPORT One)	(b) Monthly Report	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)	
(a) Quarterly Reports:			Mar 20 (M3)		Jun 20 (M6)	Comple Comple	20 (M9)	Dec 20 (M12) (Non-Election Year Only)	
	April 15 Quarterly Report (0	Q1)	Apr 20 (M4)	<u> </u>	Jul 20 (M7)	<u> </u>	20 (M10)	Jan 31 (YE)	
	July 15 Quarterly Report (6	Q2)	y Election t for the:	Primary (12 Convention	i i i i i i i i i i i i i i i i i i i	General (	Commit	Runoff (12R)	
	October 15 Quarterly Report (	· ·	t for the.	Convention	(120)	Special (	_		
X	January 31 Year-End Report (	YE)	Election on			7 . 7 . 7	in the State o	of	
	July 31 Mid-Year Report (Non-election Year Only) (MY)	POST	y -Election t for the:	General (30	)G)	Runoff (3	OR)	Special (30S)	
	Termination Report (TER)		Election on	М	· • • • • • • • • • • • • • • • • • • •	<b>* * * * *</b> * * * * * * * * * * * * * *	in the State	of	
5. Covering Period 11 25 2014 through 12 31 2014									
certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Robert H. Frank									
Type or Print Name of Treasurer									
Signature of Treasurer  Date  Date  Date  Date									
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.									
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